

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1 Article Addressed to: 12-11-02

* 01-348
George Kohl
501 Third Street, N.W.
Washington, DC 20001

2. Article Number (Copy from service label)

0023 0771 2443

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

Justin Olney

1-2-03

C. Signature

x Justin Olney

☐ Agent☐ AddresseeD. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.O.

4. Restricted Delivery? (Extra Fee)

☐ Yes

DOCKET NO. 01-348

DEC 11 2002

FCC - MAILROOM

CERTIFIED

MAIL

ORDER DATED

12-11-02

FCC 0211-112

MIMEOGRAPH NO.

RETURN

RECEIPT

REQUESTED

NAME: George Kohl
501 Third Street, N.W.
Washington, DC 20001

C. R. R. NO.

BY

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

Article Sent To:

Postage: \$ 37

Certified Fee 2.30

Return Receipt Fee
(Endorsement Required)

1.75

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees \$ 4.42

Postmark
Here

01-348

Name (Please Print Clearly) (to be completed by mailer)

George Kohl

Street, Apt. No. or PO Box No.

501 Third Street, N.W.

City, State, ZIP+4

Washington, DC 20001

PS Form 3800, July 1999

See Reverse for Instructions

7000 0600 0023 0771 2443